## PART B - FEE(S) TRANSMITTAL

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)
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Please check the appropriate assignee category or categories (will not be printed on the patent):	
4a. The following fee(s) are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
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Advance Order - # of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 090447 (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above)	
a. Applicant claims SMALL ENTITY status. See 37 CER 1.27.	□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
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